187517300

PATENT APPLICATION FEE DETERMINATION RECORD								Application or Docket Number				
Effective October 1, 2004										7	1635	-
CLAIMS FILED - PART I								SMALL EN	ITITY	OR	OTHER SMALL E	
			(Column 1) (Co		(Col	umn 2)		RATE	FEE	ſ	RATE	FEE
OTAL CLAIMS									100			
OR			NUMBER FILED		NUMBER EXTRA		i	BASIC FEE	413	OR	BASIC FEE	
OTAL CHARGEABLE CLAIMS			(5 minus 20 = *					X\$9=		OR	X \$ 18 =	
IDEPENDENT CLAIMS			2 minus 3 = *					X \$ 44 =		OR	X \$ 88 =	
MULTIPLE DEPENDENT CLAIM PRESENT								+ \$ 150 =		OR	+ \$ 300 =	
If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	775	OR	TOTAL	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
۷ ا		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	T R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MEN	Total	*	Minus	**	=			X\$9=		OR	X \$ 18 =	
AMENDMENT	Independent	*	Minus	***		:		X \$ 44 =		OR	X \$ 88 =	
	<u> </u>	NTATION OF N	MULTIPLE DEF	PENDENT CL			1	+ \$ 150 =		OR	+ \$ 300 =	
							1	TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Column	2)	(Column 3)	_	7,0011.122		-		
18		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBEI PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE
MEN	Total	*	Minus	**		<b>E</b>		X \$ 9 =		OR	X \$ 18 =	
AMENDMENT B	Independent	*	Minus	***		=		X \$ 44 =		OR	X \$ 88 =	
₹		ENTATION OF	MULTIPLE DE	PENDENT C	LAIM		1	+ \$ 150 =		OR	+ \$ 300 =	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Column	1 2)	(Column 3)		7.00				
10		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ER ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
MEN	Total	*	Minus	**		=		X \$ 9 =		OR	X \$ 18 =	
AMENDMENT	Independent	*	Minus	***		=		X \$ 44 =		OR	X \$ 88 =	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 150	=	OR	+ \$ 300 =	
								TOTAL ADDIT. FE	E	OR	TOTAL ADDIT. FEE	
*	If the "Highest h	olumn 1 is less tha Number Previoush Number Previoush umber Previoush	Paid For IN TH	IS SPACE is le	es than	"20", enter "20" 1'3" enter "3".				lumn 1.		

FORM PTO-875 (Rev. 11/2004)

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